Mar Art Frank

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF APPLICATION AN

PHNL021189 US

As a below named inventor, I h	nereby declare that:		
My residence, post office addr	ess and citizenship are as stat	ed next to my name.	
plural names are listed below) entitled:	of the subject matter which is	name is listed below) or an original claimed and for which a patent is s	, first and joint inventor (if sought on the invention
the specification of which (che	ck only one item below):		
is attached hereto.			·
☐ was filed as United States a	application		
Serial No			
on			
and was amended			
on			
was filed as PCT internation Number PCT/TB2003/004 on 31 October 200	971		
and was amended under PCT	Article 19		
•			(if applicable).
I hereby state that I have revie claims, as amended by any an		ents of the above-identified specific	ation, including the
I acknowledge the duty to disc Title 37, Code of Federal Regu		rial to the examination of this appli	cation in accordance with
or inventor's certificate or of ar States of America listed below any PCT international applicat	ny PCT international application and have identified below any ion(s) designating at least one	States Code, § 119 of any foreign n(s) designating at least one count foreign application(s) for patent or country other than the United States the application(s) of which priority	ry other than the United rinventor's certificate or es of America filed by me
PRIOR FOREIGN/PCT APPLI	CATION(S) AND ANY PRIOR	ITY CLAIMS UNDER 35 U.S.C. 11	9:
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	02080059.5	03 December 2002	YES
	11.5	DEDARTMENT OF COMMERCE PO	tent and Trademarks Office

1,		•					
		n For Patent Applic T International Application		ver of Attorney (Continue	d)	Attorneys Docket Number PHNL021189 US	
				t the following attorney(s) and/on. (List name and registration n		ecute this application and transact	
Jack I	E. Haken, Reg. No	26.902			Direct Telephon		
	ael E. Marion, Re				(name and telep	•	
	rd M. Blocker, Re				(914)332-022	22	
201	FULL NAME OF INVENTOR	FAMILY NAME KUIPER		FIRST GIVEN NAME Stein		SECOND GIVEN NAME	
	RESIDENCE &	CITY	11 >	STATE OR FOREIGN COU		COUNTRY OF CITIZENSHIP	
	CITIZENSHIP	Eindhoven /		The Netherlands	4	The Netherlands	
	POST OFFICE	POST OFFICE ADDRI		CITY		STATE & ZIP CODE/COUNTRY	
	ADDRESS	Prof. Holstlaai	า 6	5656 AA Eindhove	en	The Netherlands	
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME	
	INVENTOR	WOLTERINK		Edwin		Maria	
202	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY The Netherlands		COUNTRY OF CITIZENSHIP	
	CITIZENSHIP	Eindhoven	Eindhoven			The Netherlands	
	POST OFFICE	POST OFFICE ADDRESS Prof. Holstlaan 6		5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY	
	ADDRESS					The Netherlands	
true: a impriso	nd further that these	e statements were made der section 1001 if Title 1	with the knowledg	ge that willful false statements	and the like so ma	ermation and belief are believed to be ade are punishable by fine or a may jeopardize the validity of the	
SIGNA	SHA	OR 201		F INVENTOR 202			
DATE	01 July 2004		DATE				

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

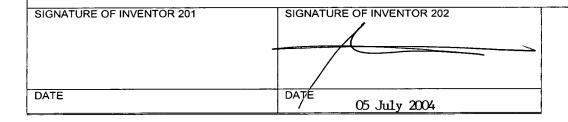
(July 1994)

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY REC 0 PC

As a below named inventor, I he	ereby declare that:				
My residence, post office addre	My residence, post office address and citizenship are as stated next to my name.				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: the specification of which (check only one item below):					
is attached hereto.					
was filed as United States a	pplication				
Serial No ————					
on					
and was amended					
on					
X was filed as PCT internation	al application				
Number <u>PCT/IB2003/00497</u>			·		
31 October 2003					
on ———					
and was amended under PCT Article 19					
on (if applicable).					
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.					
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).					
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:					
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:					
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119		
Europe	02080059.5	03 December 2002	YES		
	<u> </u>	<u></u>			

Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number (includes Reference to PCT International Applications) Attorneys Docket Number PHNL021189 US						
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)						
Jack E	E. Haken, Reg. No	o. 26,902		Direct Telephor		
Michael E. Marion, Reg. No. 32, 266 (name and telephone number)				· ·		
Edward M. Blocker, Reg. No. 30,245			(914)332-02	22		
Dawa	Edward M. Biocker, Reg. 140. 50,245					
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME	
	INVENTOR	KUIPER	Stein			
201	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP	
	CITIZENSHIP	Eindhoven	The Netherlands		The Netherlands	
[POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY	
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven		The Netherlands	
	FULL NAME OF	FAMILYNAME	FIRST GIVEN NAME		SECOND GIVEN NAME	
	INVENTOR	WOLTERINK	Edwin		Maria	
202	RESIDENCE &	CITY	STATE OR FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP	
202	CITIZENSHIP	Eindhoven \\ \(\	The Netherlands		The Netherlands	
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY	
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhove	en	The Netherlands	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.



U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

10/53 6015 Rec'd PCT/PTO 31 PTO/SB/80 (11-04) Approved for use through 11/30/2005, OMB 0651-035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

3/0/2	y revoke all previous powers of attorney 3.73(b).	y given in the app	lication identifie	ed in the attached stat	tement under
I hereby	y appoint:				
X Pra	actitioners associated with the Customer Number	r: 24	737.		
		<u> </u>			
L Ha	actitioner(s) named below (if more than ten paten	it practitioners are to b	e named, then a cu	ustomer number must be u	ised):
	Name	Registration Number		Name	Registration Number
L					Number
					+
					1
					ļ
as afforne	sile) or assert(e) to marge and the imparationed he				
	y(s) or agent(s) to represent the undersigned be Il patent applications assigned only to the unders o this form in accordance with 37 CFR 3.73(b).	fore the United States signed according to the	Patent and Traden USPTO assignme	nark Office (USPTO) in cor ent records or assignment	nnection with documents
	ange the correspondence address for the applica	etion identified in the a	Hanhad statement		
_		audit identification in a	Macieu statemen.	Under 37 CFR 3.73(0) to.	-
\mathbf{x}	The address asset the decition of the continuous blooms are	247	27		
OR	The address associated with Customer Number:	(-21	3/)		
	m or lividual Name		/		
Address					
24.					Ī
City	1	State		Zip	
Country					
Telephon	10		Fax	· · · · · · · · · · · · · · · · · · ·	
Assignee Name and Address:					
KONINKLIJKE PHILIPS ELECTRONICS N.V.					
Groenewoudseweg 1					
5621 BA Eindhoven, The Netherlands					
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be					
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the appointed					
and must identify the application in which this Power of Attorney is to be filed.					
SIGNATURE of Assignee of Record					
The idividual whose signature and title is supplied below is authorized to act on behalf of the assignee					
Signature	Mikaje. M	in		Date 14 Januar	ry 2005
Name	Michael E. Marion			Telephone (914)	333-9637
Title	Authorized Representat	tive		<u> </u>	

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

0/536915

JC06 Rec'd PCT/PTO

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

> Corporate Counsel Title

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Koninklijke Philips Electronics N.V. Application No./Patent No.: Concurrently Filed/Issue Date: Concurrently Entitled: MANUFACTURING OF LENS ELEMENTS Koninklijke Philips Electronics N.V. a <u>corporation</u> (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) states that it is: 1. It the assignee of the entire right, title, and interest; or 2. \square an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is in the patent application/patent identified above by virtue of either: A. [] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame ____, or for which a copy thereof is attached. OR B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: - To: -The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____ ____, or for which a copy thereof is attached. To: The document was recorded in the United States Patent and Trademark Office at Reel , Frame , or for which a copy thereof is attached. To: The document was recorded in the United States Patent and Trademark Office at _____, Frame _____, or for which a copy thereof is attached. [] Additional documents in the chain of title are listed on a supplemental sheet. [] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. Gregory L. Thorne, Reg. 39,398 Date Typed or printed name (914) 333-9665 Telephone number Signature

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.